

## City of New Berlin Military Banner Program "Celebrate Our Local Heroes"

<u>APPLICATION FORM</u>: This form must be completed, signed & submitted along with an official electronic service photo to <u>mschneider@newberlin.org</u>. Please complete as much information listed below as possible.

Name of Serviceman:	Phone:
Address:	
Email:	
	Unit:
Rank:	
Hometown:	
Year of Graduation from High So	chool:
Brief Military Background:	
Notable Military Awards:	
Deployments:	
Act(s) of Heroism:	
Community Service:	
Other Awards:	
	ted by someone other than the Serviceman, please complete se note that the Serviceman being honored will still need to f the application.
Name	Relationship to Serviceman
Email	Phone



## City of New Berlin Military Banner Program "Celebrate Our Local Heroes"

## Agreement

I hereby agree to be a participant in New Berlin's "Celebrate our Local Heroes" Military Banner program and I hereby grant the City of New Berlin permission to use my likeness in a photograph in any and all of its publications including website entries, social media entries, **street light decorative banners** or print publications without payment or any other consideration in perpetuity. I understand and agree that these materials will become the property of the City of New Berlin and will not be returned.

I hereby irrevocably authorize the City of New Berlin to edit, alter, copy, exhibit, publish or distribute this photo for the purposes of publicizing the City of New Berlin's Military Banner Program or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product including written or electronic copy wherein my likeness appears. Additionally, I waive my right to royalties or other compensation arising or related to the use of my photo/image.

I hereby hold harmless, release and forever discharge the City of New Berlin, its officers, agents, insurers and assigns from all claims, demands, actions, causes of action which I, my heirs, representatives, personal representatives, administrators or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I am 18 years of age or older and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning and impact of this release. I agree to indemnify and hold harmless the City of New Berlin from any and all losses, claims, expenses, suits, costs, demands and damages or liabilities, including actual attorney's fees arising on account of personal injury, death or property damage of any nature whatsoever and by whomsoever made arising out of this Military Banner Program or the photographic image referred to herein or its use and publication.

Signature of Serviceman/woman	Date
Name (Please print)	

**APPLICATION DEADLINE:** To be considered for the 2023 season, applications must be received by **May 1, 2023**. Applications received after this date will be retained on file for future year consideration.

Return application AND an electronic copy of a service photo to: New Berlin City Hall

Attn: Mayor's Office 3805 S Casper Drive New Berlin WI 53151 mschneider@newberlin.org